

Introduced by Senator Ridley-Thomas

February 23, 2007

An act to add Sections 12693.745, 12698.40, and 12726 to, and to add Part 6.6 (commencing with Section 12739.6) to Division 2 of, the Insurance Code, and to amend Section 12304.2 of the Welfare and Institutions Code, relating to supportive services providers.

LEGISLATIVE COUNSEL'S DIGEST

SB 867, as introduced, Ridley-Thomas. In-home supportive services.

Existing law provides for the In-Home Supportive Services (IHSS) program, under which, either through employment by the recipient, or by or through contract by the county, qualified aged, blind, and disabled persons receive services enabling them to remain in their own homes. Existing law permits services to be provided under the IHSS program either through the employment of individual providers, a contract between the county and an entity for the provision of services, a contract between the county and a nonprofit consortium, or the creation by the county of a public authority. Under existing law, a recipient of in-home supportive services who receives services either through a contract or managed care provider may select any qualified person to provide those services, subject to program requirements.

Existing law provides for the Long-Term Care Integration Pilot Program, to integrate the financing and administration of long-term care services in up to 5 pilot project sites in the state.

This bill would authorize a recipient who receives personal care and in-home services through a long-term care integration pilot project to select his or her own service provider, subject to program requirements.

Existing law further provides for the Access for Infants and Mothers program (AIM), the Healthy Families Program, and the Major Risk

Medical Insurance Program (MRMIP), all of which are administered by the Managed Risk Medical Insurance Board, to provide various health services to qualified individuals.

This bill would authorize a recipient who receives personal care and in-home services through AIM, the Healthy Families Program, MRMIP, or any publicly funded program enacted prior to, or on or after, January 1, 2008, to select his or her own service provider, subject to program requirements.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 12693.745 is added to the Insurance
2 Code, to read:

3 12693.745. (a) Any subscriber who receives personal care and
4 in-home services under this part, may, subject to program
5 requirements, select any qualified person to provide care under
6 this part.

7 (b) For purposes of this section, “qualified person” means any
8 employee of the contract or managed care provider through which
9 the recipient may receive personal care and in-home services under
10 this part who is available and eligible to provide the services.

11 SEC. 2. Section 12698.40 is added to the Insurance Code, to
12 read:

13 12698.40. (a) Any subscriber who receives personal care and
14 in-home services under this part, may, subject to program
15 requirements, select any qualified person to provide care under
16 this part.

17 (b) For purposes of this section, “qualified person” means any
18 employee of the contract or managed care provider through which
19 the recipient may receive personal care and in-home services under
20 this part who is available and eligible to provide the services.

21 SEC. 3. Section 12726 is added to the Insurance Code, to read:

22 12726. (a) Any subscriber who receives personal care and
23 in-home services under this part, may, subject to program
24 requirements, select any qualified person to provide care under
25 this part.

26 (b) For purposes of this section, “qualified person” means any
27 employee of the contract or managed care provider through which

1 the recipient may receive personal care and in-home services under
2 this part who is available and eligible to provide the services.

3 SEC. 4. Part 6.6 (commencing with Section 12739.6) is added
4 to Division 2 of the Insurance Code, to read:

5
6 PART 6.6. PERSONAL CARE SERVICE PROVIDER OPTIONS
7

8 12739.6. (a) With respect to the receipt of personal care and
9 in-home services under any publicly funded program, whether
10 enacted prior to, or on or after, January 1, 2008, any program
11 beneficiary, may, subject to program requirements, select any
12 qualified person to provide care under that program.

13 (b) For purposes of this section, “qualified person” means any
14 employee of the contract or managed care provider through which
15 the recipient may receive personal care and in-home services, as
16 provided in subdivision (a), who is available and eligible to provide
17 the services.

18 SEC. 5. Section 12304.2 of the Welfare and Institutions Code
19 is amended to read:

20 12304.2. (a) ~~A~~ *Notwithstanding any other provision of law, a*
21 *recipient who receives services under this article through either a*
22 *contract or, managed care provider, or long-term care integrated*
23 *care project* may, subject to program requirements, select any
24 qualified person to provide care under this article.

25 (b) For purposes of this section, “qualified person” means any
26 employee of the contract or managed care provider through which
27 the recipient may receive services under this article who is available
28 and eligible to provide the services.